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Application Number	10/661,995
Filing Date	12 Sep 2003
First Named Inventor	TSAUR, Garry
Title	APPLICATOR WITH TWO LIQUIDS
Art Unit	
Examiner Name	
Attorney Docket Number	5300/0155PUS1

I hereby revoke all previous powers of attorney given in the above-identified application.

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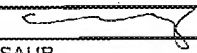
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	
Name	Garry TSAUR	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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